FART B - FEE(S) TRANSMITTAL and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents MAR 0 8 2007 P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 INSTRUCTIONS: This form should be used to cansmitting the SUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the property of the correspondence address as indicated unless corrected below or directed otherwise to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 01/09/2007 7590 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (\$11) 273-2885, on the date indicated below. Thomas E. Anderson 8707 Seven Locks Road Bethesda, MD 20817 03/09/2007 RMEBRAH1 00000067 10651093 (Depositor's nam MERSON (Signature 01 FC:2501 700.00 DP CONFIRMATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. APPLICATION NO. ACCESS-008XX 7731 Thomas F. Egan 08/29/2003 10/651,093 TITLE OF INVENTION: ELECTRICALLY-ACTUATED TRANSFER SEAT PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE ISSUE FEE DUE SMALL ENTITY APPLN. TYPE \$700 04/09/2007 \$700 \$0 YES nonprovisional **CLASS-SUBCLASS** ART UNIT **EXAMINER** KRUER, STEFAN 3654 414-542000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

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U.S. Patent Application No. 10/651,093 Attorney Docket No.: ACCESS-008XX

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Group Art Unit: 3654

Thomas F. Egan

: Examiner: Stefan Kruer

Appln. No.: 10/651,093

Filed: August 29, 2003

Confirmation No.: 7731

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Respectfully submitted

Thomas E. Anderson

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Date: March 5, 2007